

## Late Registration of a Well

- ❖ Review instructions prior to completing form in black or blue ink.
- ❖ You must include with your application:
  - check or money order for the fee(s)
- ❖ Authority for fee: A.R.S. § 45-113(B), A.A.C. R12-15-151(B)(4)(a)

AMA / INA	B	SB
RECEIVED	DATE	WS
ISSUED	DATE	WQARF CERCLA

FILE NUMBER
WELL REGISTRATION NUMBER <b>55 -</b>

**\*\* PLEASE PRINT CLEARLY \*\***

## SECTION 1. REGISTRY INFORMATION

Well Type	Fee	Location of Well					
<input type="checkbox"/> <b>Exempt</b> (Pump has a maximum capacity of not more than 35 gpm <u>and</u> water is not used for irrigation purposes inside an AMA.) ( <i>See instructions.</i> )	\$10	WELL LOCATION ADDRESS (IF ANY)					
		TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE 1/4	40 ACRE 1/4	10 ACRE 1/4
<input type="checkbox"/> <b>Non-Exempt</b> (Pump has a maximum capacity of more than 35 gpm <u>or</u> water is used for irrigation purposes inside an AMA.) ( <i>See instructions.</i> )	\$20	LATITUDE			LONGITUDE		
		° Degrees	' Minutes	" Seconds	° Degrees	' Minutes	" Seconds
		COUNTY ASSESSOR'S PARCEL ID NUMBER					
		BOOK		MAP	PARCEL	# OF ACRES	
ORIGINAL WELL DRILLING FIRM (IF KNOWN)		PLACE OF USE (ONLY IF DIFFERENT FROM LOCATION OF WELL)					
ORIGINAL WELL DRILL DATE (ESTIMATE IF NOT KNOWN)		TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE 1/4	40 ACRE 1/4	10 ACRE 1/4
PROPERTY OWNER WHEN WELL WAS DRILLED (IF KNOWN)		COUNTY WHERE WELL IS LOCATED					

## SECTION 2. OWNER INFORMATION

Well Owner		Landowner (if different from Well Owner)	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL		FULL NAME OF COMPANY, GOVERNMENT AGENCY, OR INDIVIDUAL	
MAILING ADDRESS		MAILING ADDRESS	
CITY / STATE / ZIP CODE		CITY / STATE / ZIP CODE	
CONTACT PERSON NAME AND TITLE		CONTACT PERSON NAME AND TITLE	
TELEPHONE NUMBER	FAX	TELEPHONE NUMBER	FAX

### SECTION 3.

Questions	Yes	No	If Yes:
1. Is the well site within 100 feet of a septic tank system, sewer disposal area, landfill, hazardous materials or petroleum storage area or tank?			
2. Is there another well name or identification number associated with this well?			PLEASE STATE
3. If this well is an exempt well, is it the second exempt well on this parcel for the same use?			

**SECTION 4. WATER/SITE INFORMATION**

<b>Principal Use of Water</b>	<b>Other Uses of Water</b>	MAXIMUM PUMP CAPACITY	
CHECK <u>ONE</u>	CHECK <u>ALL THAT APPLY</u>	Gallons Per Minute	
<input type="checkbox"/> Irrigation (# of acres _____ ) <input type="checkbox"/> Utility <input type="checkbox"/> Commercial <input type="checkbox"/> Domestic <input type="checkbox"/> Municipal <input type="checkbox"/> Industrial <input type="checkbox"/> Mining <input type="checkbox"/> Stock <input type="checkbox"/> Recharge <input type="checkbox"/> Dewatering <input type="checkbox"/> Other (please specify):	<input type="checkbox"/> Irrigation (# of acres _____ ) <input type="checkbox"/> Utility <input type="checkbox"/> Commercial <input type="checkbox"/> Domestic <input type="checkbox"/> Municipal <input type="checkbox"/> Industrial <input type="checkbox"/> Mining <input type="checkbox"/> Stock <input type="checkbox"/> Recharge <input type="checkbox"/> Dewatering <input type="checkbox"/> Other (please specify):	TOTAL DEPTH OF WELL Feet Below Land Surface	
		STATIC WATER LEVEL Feet Below Land Surface	

**SECTION 5. EXISTING WELL CONSTRUCTION DESIGN** (attach additional page if needed)

<b>Borehole</b>			<b>Existing Casing (to the best of your knowledge)</b>												
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE ( T )				BLANK OR NONE	PERFORATION TYPE ( T )				SLOT SIZE IF ANY (inches)
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE		WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	

<b>Existing Annular Material (to the best of your knowledge)</b>												
DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE ( T )								FILTER PACK		
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				

I state that this registration is complete and correct to the best of my knowledge and belief.

TYPE OR PRINT NAME AND TITLE

SIGNATURE OF WELL OWNER OR LANDOWNER

DATE